

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 381

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Carrie L. Hall

Mailing Address 5628 E Monterosa Street

City State Zip Code
 Phoenix AZ 85018-4646

FEC ID number of contributing federal political committee.

C

Name of Employer
 New York Life Insurance Company

Occupation
 Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2012

Transaction ID : PR19537133

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Ms. Charmaine L. Goodman

Mailing Address 8100 Strecker Lane

City State Zip Code
 Plano TX 75025-4349

FEC ID number of contributing federal political committee.

C

Name of Employer
 New York Life Insurance Company

Occupation
 Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2012

Transaction ID : PR19557133

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. John Glass

Mailing Address 3174 E Stella Lane

City State Zip Code
 Phoenix AZ 85016-2343

FEC ID number of contributing federal political committee.

C

Name of Employer
 New York Life Insurance Company

Occupation
 Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 31 2012

Transaction ID : PR19577133

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

488.48

TOTAL This Period (last page this line number only)..... ►